

Physical Activity

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Introduction

Research has clearly shown that physically active people will have better health than physically inactive people. They will live longer, feel better and be less likely to become sick^{1,2}. Many diseases and health conditions are positively affected by increased levels of physical activity, including coronary heart disease, hypertension, obesity and osteoporosis^{3,4,5,6}. The Surgeon General's report on physical activity and health concludes that people of all ages benefit from regular physical activity and that significant health benefits are obtained through a moderate daily amount of physical activity. Examples of a moderate level of physical activity would be 30 minutes of walking or raking leaves, 15 minutes of running or 45 minutes of playing volleyball¹.

Respondents to the BRFSS were asked whether they exercise and the types and frequency of activities performed. This information is used to identify respondents whose physical activity levels can be classified in the following ways:

Sedentary lifestyle: no reported activity or any physical activity or pair of activities done for less than 20 minutes or less than three times per week.

Regular and sustained activity: any physical activity or pair of physical activities that are done for 30 minutes or more per session, five or more times per week, regardless of intensity.

The *Healthy People 2000* objective for sedentary lifestyle is to *reduce to no more than 15 percent the proportion of people aged six and older who engage in no leisure time activity*. The New York State Depart-

ment of Health has identified physical activity as a health priority area. The objective in this area is to *increase to at least 30 percent of adults (age 18 and over) and 20 percent of young people (age 12 to 21) participating in regular and sustained physical activity*⁷.

Results

Sixty-eight percent of the New York population is sedentary and approximately 15 percent of the population meets the criteria for regular and sustained activity levels. Table 1 reports estimates of sedentary lifestyle and regular and sustained activity within categories of age, gender, race, education and income. There is a statistically significant difference in the level of sedentary behavior between young adults (18 to 34) and seniors (55 and over). However, the difference does not hold for regular and sustained activity. For both sedentary lifestyle and regular and sustained activity, there is little difference in percentage by gender. The percentages estimated for the population by race are significantly different for both sedentary lifestyle and regular and sustained activity. The nonwhite population had a 15 percent higher level of sedentary lifestyle and a 6.1 percent lower level of regular and sustained activity. Income and education levels show very similar physical activity profiles. The level of sedentary lifestyle increases and the level of regular and sustained activity decreases with income and with education.

Conclusions and Discussion

Sedentary lifestyle peaked in 1988. After remaining on a fairly steady decline, sedentary lifestyle in-

creased slightly in 1994 (see Figure 1). The percentage of the New York population estimated to be living a sedentary lifestyle in 1994 increased more than 5 percent from the 1992 estimate (67.5% and 62.2%, respectively). Furthermore, 45 participating states had lower estimates for sedentary lifestyle than New York in 1994. The pattern is similar for regular and sustained physical activity. The New York estimate for 1994 ranks lower than 44 other participating states, and decreased by 3 percent from the 1992 estimate (14.8% and 17.9%, respectively). Because of the many adverse conditions associated with a sedentary lifestyle and the large proportion of the New York population practicing these unhealthy lifestyle behaviors, the New York Department of Health has made physical activity a priority area. The Department of Health recommends that communities:

- provide environmental inducements for physical activity, such as walking trails and bike paths;
- open school facilities for community recreation;
- encourage health care providers to talk routinely to their patients about incorporating physical activity into their daily lives; and
- encourage employers to provide supportive worksite environments and policies that offer opportunities for employees to incorporate physical activity into their daily lives⁷.

References

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Figure 1. Percent of adults who report a sedentary lifestyle for New York State: BRFSS, 1986-1994

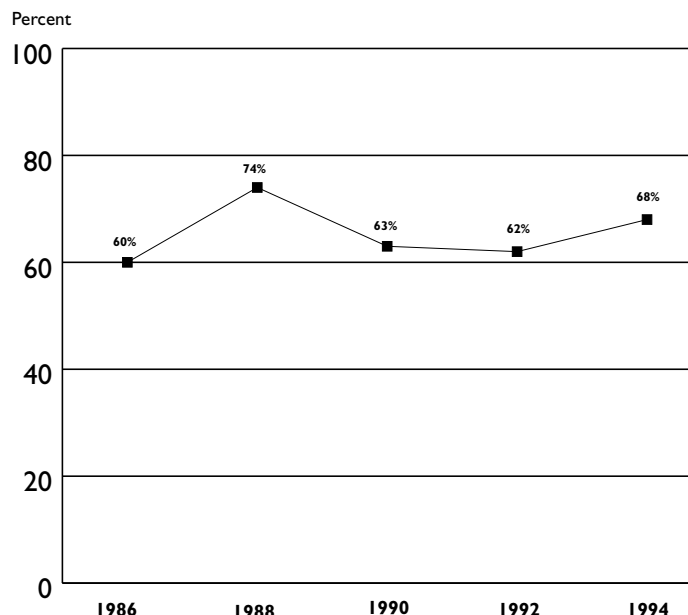


Table 1: Adults reporting a sedentary lifestyle* or regular and sustained levels of physical activity ** for New York State: BRFSS, 1994

Sociodemographic Characteristic	Sedentary lifestyle		Regular and sustained physical activity	
	Percent	confidence interval (95%)	Percent	confidence interval (95%)
Total	67.5%	±2.2	14.8%	±1.7
Age				
18-34	60.6	±4.1	18.0	±3.3
35-54	70.5	±3.2	12.2	±2.3
55 & over	72.1	±3.7	14.1	±2.8
Sex				
male	67.0	±3.4	14.3	±2.6
female	68.0	±2.8	15.2	±2.1
Race				
white	63.8	±2.6	16.7	±2.0
nonwhite	78.8	±4.1	8.8	±2.7
Income				
<\$10,000	74.1	±5.1	12.1	±3.7
\$10,000-\$24,999	73.0	±4.6	13.4	±3.5
\$25,000-\$50,000	66.1	±4.4	13.0	±2.9
> \$50,000	58.7	±5.1	19.2	±4.0
Education				
< than high school	75.3	±4.7	13.9	±3.9
high school	70.9	±3.8	13.7	±3.0
some college	66.3	±4.5	14.7	±3.6
college	58.2	±4.5	17.0	±3.1

* Sedentary lifestyle is defined as not exercising more than three times per week, or more than 20 minutes a session during the month interviewed.

** Regular and sustained activity is defined as any physical activity or pair of physical activities that are done for 30 minutes or more per session, five or more times per week, regardless of intensity.